

COVER PAGE

FEB - 3 2015

Please type or print in ink.

CG

NAME OF FILER (LAST) (FIRST) (MIDDLE)
McQuaid Margaret

ALBANY CITY CLERK

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Albany

Division, Board, Department, District, if applicable

Your Position

City Council member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: City of Albany

Position: Oversight Board to Successor Agency

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of City of Albany

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Annual: The period covered is January 1, 2014, through December 31, 2014.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2014.

☐ The period covered is January 1, 2014, through the date of leaving office.

☒ Assuming Office: Date assumed 12 / 08 / 2014

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 1

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☒ None - No reportable interests on any schedule

5.

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 02/03/2015

(month, day, year)